## I-2200 CREDITABLE HEALTH INSURANCE

## I-2210 General Information

Applicable to Louisiana Children's Health Insurance Program (LaCHIP), Breast and Cervical Cancer (BCC) program and Take Charge Plus (TCP) program applicants/enrollees only.

Applicants/enrollees are considered *uninsured*, for the purposes of determining eligibility, if they do not have creditable health insurance coverage. *Creditable coverage* is defined by the Health Insurance Portability and Accountability Act of 1996 (HIPAA) as coverage under any of the following:

- a group health insurance plan;
- other health insurance coverage;
- Medicare Part A or Part B;
- Civilian Health and Medical Program of the Uniformed Services (CHAMPUS) or other health coverage for active military personnel:
- state health benefits risk pool;
- federal government health benefit plan;
- a public health plan; or
- health care for peace corps volunteers.

Since the HIPAA definitions of *group health plans* and *health insurance* are broad, most children with existing health coverage will not qualify as uninsured for purposes of LaCHIP. The size of the deductibles, out of pocket expenses and benefit limits do not impact whether the insurance is credible. There are a few instances in which a child with health insurance could be defined as uninsured. For example, a child which only has coverage for a specific service, such as dental care or vision services.

Creditable coverage, as defined by HIPAA, applies to the BCC program and the TCP programs. Deductibles and out-of-pocket expenses have no impact as to whether or not the insurance is creditable. However, federal regulations allow certain exceptions for BCC and TCP not given under the LaCHIP program.

Under BCC, applicants/enrollees may be considered uninsured if:

- the treatment of breast or cervical cancer is not covered by the policy;
- the lifetime limit on all benefits under the plan or coverage has been exhausted;
- she is in a period of exclusions (such as a pre-existing condition exclusion) for treatment of breast or cervical cancer; or
- she is an American Indian or Alaska Native eligible for health care services provided under a medical program of Indian Health Services or of a tribal organization.

TCP applicants/enrollees who have insurance can be enrolled if:

- their insurance does not cover family planning services; or
- some but not all family planning services are covered.

In these situations, the analyst should collect and enter the Third Party Liability (TPL) information. Medicaid is the payer of last resort, and cannot pay for any family planning services covered by insurance.

## I-2210.1 Louisiana Health Insurance Premium Payment Program (LaHIPP)

TCP applicants/enrollees are not required to be referred to LaHIPP. However, if the applicant/enrollee has been sanctioned for failure to cooperate with LaHIPP in their MAGI-related case, they are not eligible for TCP.